



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## \*BIBDATASHEET\*

CONFIRMATION NO. 5046

Bib Data Sheet

|                             |                                       |              |                        |                                |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|
| SERIAL NUMBER<br>09/800,684 | FILING DATE<br>03/07/2001<br><br>RULE | CLASS<br>370 | GROUP ART UNIT<br>2665 | ATTORNEY<br>DOCKET NO.<br>23-2 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|

APPLICANTS  
 Albert D. Baker, Lincroft, NJ;  
 Eraj D. Kaluarachchi, South Orange, NJ;

\*\* CONTINUING DATA \*\*\*\*\* None / LK 3/4/05

\*\* FOREIGN APPLICATIONS \*\*\*\*\* None / LK 3/4/05

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 04/17/2001

|   |   |                           |                        |                       |                            |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR<br>COUNTRY<br>NJ | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>16 | INDEPENDENT<br>CLAIMS<br>4 |
| Verified and<br>Acknowledged                                | Allowance<br>Examiner's Signature _____ Initials <u>LK</u>          |                           |                        |                       |                            |

ADDRESS  
 Ryan, Mason & Lewis, LLP  
 90 Forest Avenue  
 Locust Valley, NY  
 11560

TITLE  
 Automatic protocol version detection and call processing reconfiguration in a communication system

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>790 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------------|---|---|